

**Fill in this information to identify the case:**Debtor name Krieger Craftsmen, Inc.United States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGAN

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 9, 2020**X /s/ Timothy J. Krieger**

Signature of individual signing on behalf of debtor

**Timothy J. Krieger**

Printed name

**President**

Position or relationship to debtor

**Fill in this information to identify the case:**Debtor name **Krieger Craftsmen, Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**

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☐ Check if this is an amended filing**Official Form 206Sum****Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **0.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **1,566,484.07****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **1,566,484.07****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **4,393,005.56****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **18,798.69****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **1,952,179.42****4. Total liabilities** .....  
Lines 2 + 3a + 3b\$ **6,363,983.67**

**Fill in this information to identify the case:**Debtor name **Krieger Craftsmen, Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**

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☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

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Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****2. Cash on hand****\$476.16****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

**3.1. Chemical Bank (TCF National Bank)****Checking Account****4572****\$77,905.55****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$78,381.71****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.  
☒ Yes Fill in the information below.

**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

**Gantry Business Solutions, LLC****7.1. Financial Advisors****\$15,367.50****Keller & Almassian, PLC****7.2. Attorney Fees****\$3,976.50**

Debtor **Krieger Craftsmen, Inc.**  
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8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**  
Description, including name of holder of prepayment

8.1. **Prepaid TST Software Maintance** **\$7,516.72**

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

**\$26,860.72**

**Part 3: Accounts receivable**

10. **Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.  
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: **470,156.64** - **9,965.00** = .... **\$460,191.64**  
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

**\$460,191.64**

**Part 4: Investments**

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.  
☐ Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.  
☒ Yes Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. <b>Raw materials Perishable tooling inventory</b>		<b>\$28,032.01</b>	<b>Current Value</b>	<b>\$3,800.00</b>

20. **Work in progress**

21. **Finished goods, including goods held for resale**

22. **Other inventory or supplies**

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

**\$3,800.00**

24. **Is any of the property listed in Part 5 perishable?**

- ☐ No  
☒ Yes

Debtor Krieger Craftsmen, Inc.  
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25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

☒ No☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current Value \_\_\_\_\_

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

☒ No☐ Yes**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.☐ Yes Fill in the information below.**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☐ No. Go to Part 8.☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Office furniture, misc.	\$3,000.00	Current Value	\$3,000.00
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software Office equipment, misc.	\$7,500.00	Current Value	\$7,500.00

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

**\$10,500.00**

44. Is a depreciation schedule available for any of the property listed in Part 7?

☒ No☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

☒ No☐ Yes**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

☐ No. Go to Part 9.☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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47. **Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

47.1. 2006 GMC Sierra C3500 \$4,500.00 Current Value \$4,500.00

47.2. 2006 GMC Sierra 1500 \$1,000.00 Current Value \$1,000.00

47.3. 2014 GMC Sierra Pickup Truck \$6,000.00 Current Value \$6,000.00

48. **Watercraft, trailers, motors, and related accessories** *Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*

48.1. Tri-Axle Trailer \$250.00 Current Value \$250.00

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

**Equipment/Machinery**

**\*Value based on recent appraisal of Meidema and Debtor's opinion for some items.**

\$951,000.00 Appraisal \$951,000.00

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

**\$962,750.00**

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

☒ No

☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

☐ No

☒ Yes

**Part 9: Real property**

54. **Does the debtor own or lease any real property?**

☒ No. Go to Part 10.

☐ Yes Fill in the information below.

**Part 10: Intangibles and intellectual property**

59. **Does the debtor have any interests in intangibles or intellectual property?**

☐ No. Go to Part 11.

☒ Yes Fill in the information below.

**General description**

**Net book value of debtor's interest**  
(Where available)

**Valuation method used for current value**

**Current value of debtor's interest**

60. **Patents, copyrights, trademarks, and trade secrets**

61. **Internet domain names and websites**

www.KriegerCraftsmen.com \$0.00 \$0.00

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62. Licenses, franchises, and royalties

63. Customer lists, mailing lists, or other compilations  
Customer List

\$0.00

\$0.00

64. Other intangibles, or intellectual property

65. Goodwill

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?)

☒ No☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

☒ No☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

☒ No☐ Yes**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.☒ Yes Fill in the information below.Current value of  
debtor's interest71. Notes receivable  
Description (include name of obligor)72. Tax refunds and unused net operating losses (NOLs)  
Description (for example, federal, state, local)

73. Interests in insurance policies or annuities

74. Causes of action against third parties (whether or not a lawsuit  
has been filed)75. Other contingent and unliquidated claims or causes of action of  
every nature, including counterclaims of the debtor and rights to  
set off claimsPending insurance claim for loss outlined on the  
Statement of Financial Affairs

\$24,000.00

Nature of claim

Insurance Claim

Amount requested

\$24,000.00

76. Trusts, equitable or future interests in property

77. Other property of any kind not already listed Examples: Season tickets,  
country club membership

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78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

**\$24,000.00**

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No

☐ Yes



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**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<b>\$78,381.71</b>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<b>\$26,860.72</b>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<b>\$460,191.64</b>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<b>\$0.00</b>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<b>\$3,800.00</b>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<b>\$0.00</b>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<b>\$10,500.00</b>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<b>\$962,750.00</b>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<b>\$0.00</b>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<b>\$0.00</b>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<b>+</b> <b>\$24,000.00</b>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<b>\$1,566,484.07</b>	<b>+ 91b. \$0.00</b>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<b>\$1,566,484.07</b>

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☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15****Be as complete and accurate as possible.****1. Do any creditors have claims secured by debtor's property?**☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.☒ Yes. Fill in all of the information below.**Part 1: List Creditors Who Have Secured Claims****2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
<b>2.1</b>	<b>Corporate Funding, Inc.</b> <small>Creditor's Name</small> <b>5136 Cascade Road SE</b> <b>Suite 1E</b> <b>Grand Rapids, MI 49546</b> <small>Creditor's mailing address</small>  <small>Creditor's email address, if known</small>  <b>Date debt was incurred</b> <b>6/10/2016-</b> <b>Last 4 digits of account number</b> <b>1422</b> <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>CNC Machine- (2)</b>  Describe the lien <b>UCC Financing Statement- Installment Loan</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$48,847.00</b>	<b>\$86,500.00</b>

<b>2.2</b>	<b>m2 Lease Funds, LLC</b> <small>Creditor's Name</small> <b>175 N. Patrick Blvd, Suite 140</b> <b>Brookfield, WI 53045</b> <small>Creditor's mailing address</small>  <small>Creditor's email address, if known</small>  <b>Date debt was incurred</b> <b>10/17/2016-</b> <b>Last 4 digits of account number</b> <b>0467</b> <b>Do multiple creditors have an interest in the same property?</b>	Describe debtor's property that is subject to a lien <b>Spotting Press</b>  Describe the lien <b>UCC Financing Statement- Installment Loan</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply	<b>\$58,200.00</b>	<b>\$85,000.00</b>
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Name

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.☐ Contingent☐ Unliquidated☐ Disputed**2.3 TCF National Bank**

Creditor's Name

**PO Box 1527  
Midland, MI 48641**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**9/6/2018-**

Last 4 digits of account number

**7444**

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**All Personal Property****\$838,966.24****\$838,966.24**

Describe the lien

**Loan 1- Promissory Note/Security Agreement/All Asset Lien/Line of Credit**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.4 TCF National Bank**

Creditor's Name

**PO Box 1527  
Midland, MI 48641**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**6/30/2015-**

Last 4 digits of account number

**9766**

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**All Personal Property****\$565,223.43****\$565,223.43**

Describe the lien

**Loan 2- Promissory Note/Security Agreement/All Asset Lien/50% of the GROB Loan**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.5 TCF National Bank**

Creditor's Name

**PO Box 1527  
Midland, MI 48641**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**All Personal Property****\$1,056,574.89****\$1,056,574.89**

Describe the lien

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**Loan 3- Promissory Note/Security Agreement/All Asset Lien/Equipment Loan**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

**9/6/2018-**

Last 4 digits of account number

**7479**

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.6 TCF National Bank**

Creditor's Name

**PO Box 1527****Midland, MI 48641**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**9/6/2018-**

Last 4 digits of account number

**7495**

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**All Personal Property****\$1,300,000.00****\$1,300,000.00**

Describe the lien

**Loan 4- Mortgage/Security Agreement/All Asset Lien/Jenta, LLC Debtor Guarantee**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.7 Wells Fargo Bank N.A.**

Creditor's Name

**Corporate Trust Services****9062 Old Annapolis Road****Columbia, MD 21045-1951**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**2/5/2016-**

Last 4 digits of account number

**1462**

Do multiple creditors have an interest in the same property?

Describe debtor's property that is subject to a lien

**All tangible and intangible personal property****\$525,194.00****\$525,194.00**

Describe the lien

**UCC Financing Statement/50% of the GROB Loan**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Debtor **Krieger Craftsmen, Inc.**

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Name

☒ No☐ Contingent☐ Yes. Specify each creditor,  
including this creditor and its relative  
priority.☐ Unliquidated☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$4,393,005.5**  
**6****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did  
you enter the related creditor?Last 4 digits of  
account number for  
this entity**Michael L. Shiparski**  
**Assistant US Attorney**  
**PO Box 208**  
**Grand Rapids, MI 49501**Line 2.7**TCF National Bank**  
**2301 W. Big Beaver Road**  
**Suite 525**  
**Troy, MI 48084**Line 2.3**TCF National Bank**  
**2301 W. Big Beaver Road**  
**Suite 525**  
**Troy, MI 48084**Line 2.4**TCF National Bank**  
**2301 W. Big Beaver Road**  
**Suite 525**  
**Troy, MI 48084**Line 2.5**TCF National Bank**  
**2301 W. Big Beaver Road**  
**Suite 525**  
**Troy, MI 48084**Line 2.6**U.S. Small Business Admin**  
**2 North Street, Suite 320**  
**Birmingham, AL 35203**Line 2.7

**Fill in this information to identify the case:**Debtor name **Krieger Craftsmen, Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**

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☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>City of Grand Rapids</b> <b>Grand Rapids Income Tax Dept</b> <b>300 Monroe Ave NW, Rm 380</b> <b>Grand Rapids, MI 49503</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$775.42</b>	<b>\$775.42</b>
	Date or dates debt was incurred <b>2020-</b>	Basis for the claim: <b>Income Tax</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address <b>City of Walker Treasurer</b> <b>4243 Remembrance Road NW</b> <b>Walker, MI 49534</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$3,381.50</b>	<b>\$3,381.50</b>
	Date or dates debt was incurred <b>2020-</b>	Basis for the claim: <b>Personal Property Taxes</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Krieger Craftsmen, Inc.**  
Name

Case number (if known)

2.3	Priority creditor's name and mailing address <b>Kent County Treasurer</b> <b>PO Box Y</b> <b>Grand Rapids, MI 49503</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$9,307.85</b>	<b>\$9,307.85</b>
Date or dates debt was incurred <b>2019-</b>		Basis for the claim: <b>Personal Property Taxes</b>		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.4	Priority creditor's name and mailing address <b>State of Michigan</b> <b>Dept. of Treasury</b> <b>PO Box 30754</b> <b>Lansing, MI 48909</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$5,333.92</b>	<b>\$5,333.92</b>
Date or dates debt was incurred <b>2020-</b>		Basis for the claim: <b>Taxes</b>		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
3.1	Nonpriority creditor's name and mailing address <b>Alico Equipment Finance Group</b> <b>W222N833 Cheaney Road</b> <b>Waukesha, WI 53186</b> Date(s) debt was incurred <u>1/17/2017-</u> Last 4 digits of account number <u>001L</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>3D Scanner- Potential Deficiency Balance from lease rejection.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1.00</b>
3.2	Nonpriority creditor's name and mailing address <b>Allphase</b> <b>12855 Fairlane</b> <b>Livonia, MI 48150</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$350.00</b>
3.3	Nonpriority creditor's name and mailing address <b>AMBA</b> <b>7321 Shadeland Station Way</b> <b>Suite 285</b> <b>Indianapolis, IN 46256</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,853.00</b>

Debtor	<b>Krieger Craftsmen, Inc.</b> Name _____	Case number (if known) _____
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3.4	<b>Nonpriority creditor's name and mailing address</b> <b>Andy J. Egan Co, Inc.</b> <b>2001 Waldorf St NW</b> <b>Grand Rapids, MI 49544</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$36,157.87</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier/Construction</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.5	<b>Nonpriority creditor's name and mailing address</b> <b>Armrock Mechanical Contractors</b> <b>745 S. State Street</b> <b>Sparta, MI 49345</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$13,486.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.6	<b>Nonpriority creditor's name and mailing address</b> <b>Belmont Equipment &amp; Tech</b> <b>32055 Edward Ave</b> <b>Madison Heights, MI 48071</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$1,820.41</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.7	<b>Nonpriority creditor's name and mailing address</b> <b>Benchmark Welding &amp; Machine</b> <b>11314 78th Ave</b> <b>Grand Rapids, MI 49501</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$3,725.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.8	<b>Nonpriority creditor's name and mailing address</b> <b>Bico Buyers Inc.</b> <b>PO Box 671645</b> <b>Dallas, TX 75267</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$34,023.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.9	<b>Nonpriority creditor's name and mailing address</b> <b>C&amp;G Plastics</b> <b>12729 Foothill Blvd</b> <b>Sylmar, CA 91342</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$3,342.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.10	<b>Nonpriority creditor's name and mailing address</b> <b>C2 Machining</b> <b>4017 Brockton Drive SE</b> <b>Grand Rapids, MI 49512</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$400.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Krieger Craftsmen, Inc.</b> Name _____	Case number (if known) _____
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3.11	<b>Nonpriority creditor's name and mailing address</b> <b>Capital One</b> <b>PO Box 30281</b> <b>Salt Lake City, UT 84130</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Charge Account</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$90,541.62</b>
3.12	<b>Nonpriority creditor's name and mailing address</b> <b>Capital One</b> <b>PO Box 30281</b> <b>Salt Lake City, UT 84130</b> Date(s) debt was incurred <u>2020</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Charge Account</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,966.60</b>
3.13	<b>Nonpriority creditor's name and mailing address</b> <b>Cintas Uniform Services</b> <b>3149 Wilson Dr NW</b> <b>Grand Rapids, MI 49544</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,365.58</b>
3.14	<b>Nonpriority creditor's name and mailing address</b> <b>Commercial Tool &amp; Die, Inc.</b> <b>5351 Rusche Dr NW</b> <b>Comstock Park, MI 49321</b> Date(s) debt was incurred <u>9/28/2017-</u> Last 4 digits of account number <u>1730</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Lien filed- Disputed</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$14,100.00</b>
3.15	<b>Nonpriority creditor's name and mailing address</b> <b>Creative Technology Corp.</b> <b>1280 Seabury Circle</b> <b>Carol Stream, IL 60188</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$591.02</b>
3.16	<b>Nonpriority creditor's name and mailing address</b> <b>Damon, Ver Merris, Boyko &amp; Witte, PLC</b> <b>825 Parchment Dr SE, Suite 100</b> <b>Grand Rapids, MI 49546</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Legal Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$12,837.44</b>
3.17	<b>Nonpriority creditor's name and mailing address</b> <b>Eagle Industrial Group</b> <b>847 W. River Center Drive NE</b> <b>Comstock Park, MI 49321</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$13,400.00</b>

Debtor	<b>Krieger Craftsmen, Inc.</b> <small>Name</small>	Case number (if known) _____
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3.18	<b>Nonpriority creditor's name and mailing address</b> <b>Extreme Wire EDM Service, Inc.</b> <b>3636 Busch Drive SW</b> <b>Grandville, MI 49418</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15,675.00</b>
3.19	<b>Nonpriority creditor's name and mailing address</b> <b>FAS Machining, LLC</b> <b>8166 Graphic Drive</b> <b>Belmont, MI 49306</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$12,980.00</b>
3.20	<b>Nonpriority creditor's name and mailing address</b> <b>Finkl Steel</b> <b>PO Box 92576</b> <b>Chicago, IL 60675</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$11,356.19</b>
3.21	<b>Nonpriority creditor's name and mailing address</b> <b>GEM Plastics, Inc.</b> <b>2533 Thornwood Street SW</b> <b>Wyoming, MI 49519</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,900.00</b>
3.22	<b>Nonpriority creditor's name and mailing address</b> <b>Grand Rapids Telecommunication</b> <b>7700 Cary</b> <b>Rockford, MI 49341</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,600.00</b>
3.23	<b>Nonpriority creditor's name and mailing address</b> <b>Hansen Balk Steel Treating Co</b> <b>1230 Monroe Avenue NW</b> <b>Grand Rapids, MI 49505</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,071.57</b>
3.24	<b>Nonpriority creditor's name and mailing address</b> <b>Heritage Crystal Clean, Inc.</b> <b>2175 Point Blvd</b> <b>Suite 375</b> <b>Elgin, IL 60123</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$134.72</b>

Debtor	<b>Krieger Craftsmen, Inc.</b> <small>Name</small>	Case number (if known) _____
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3.25	<b>Nonpriority creditor's name and mailing address</b> <b>HRSFlow- Inglass USA</b> <b>920- 74th Street SW</b> <b>Byron Center, MI 49315</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,421.44</b>
3.26	<b>Nonpriority creditor's name and mailing address</b> <b>INCOE Corporation</b> <b>2850 High Meadow Circle</b> <b>Auburn Hills, MI 48326</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$12,075.18</b>
3.27	<b>Nonpriority creditor's name and mailing address</b> <b>JDE Machine Service</b> <b>3652 Ponderosa</b> <b>Grandville, MI 49418</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$600.00</b>
3.28	<b>Nonpriority creditor's name and mailing address</b> <b>Jeffery Crampton</b> <b>Koernke &amp; Crampton</b> <b>The Boardwalk</b> <b>940 Monroe NW, Suite 250</b> <b>Grand Rapids, MI 49503</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Legal Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$100,000.00</b>
3.29	<b>Nonpriority creditor's name and mailing address</b> <b>Jenta, LLC</b> <b>2758- 3 Mile Road NW</b> <b>Grand Rapids, MI 49534</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Rent to Landlord</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$54,000.00</b>
3.30	<b>Nonpriority creditor's name and mailing address</b> <b>Keldon Company</b> <b>7764 Clyde Park Ave SW</b> <b>Byron Center, MI 49315</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,006.95</b>
3.31	<b>Nonpriority creditor's name and mailing address</b> <b>Kind Special Alloys</b> <b>1221 Velma Court</b> <b>Youngstown, OH 44512</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,190.00</b>

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3.32	<b>Nonpriority creditor's name and mailing address</b> <b>Lou Gyenese</b> <b>333 Colony Blvd</b> <b>Suite 303</b> <b>The Villages, FL 32162</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$1,500.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.33	<b>Nonpriority creditor's name and mailing address</b> <b>Makino Die/Mold Tech</b> <b>2600 Superior Ct</b> <b>Auburn Hills, MI 48326</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$21,258.41</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.34	<b>Nonpriority creditor's name and mailing address</b> <b>MFP Automation Engineering</b> <b>4404 Central Parkway</b> <b>Hudsonville, MI 49426</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$8,572.08</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.35	<b>Nonpriority creditor's name and mailing address</b> <b>Michael Haws</b> <b>12386 Phelps Ave</b> <b>Sparta, MI 49345</b> Date(s) debt was incurred <u>2016-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$105,000.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.36	<b>Nonpriority creditor's name and mailing address</b> <b>Model Die &amp; Mold, Inc.</b> <b>3859 Roger B Chaffee Memorial</b> <b>Grand Rapids, MI 49548</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$149,225.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.37	<b>Nonpriority creditor's name and mailing address</b> <b>Mold Surface Technologies</b> <b>2385 Walker Ave NW</b> <b>Grand Rapids, MI 49544</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$1,575.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.38	<b>Nonpriority creditor's name and mailing address</b> <b>Nienhuis Financial Group</b> <b>3460 Wilson Ave SW</b> <b>Grandville, MI 49418</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$10,000.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Accounting Services, reduced from \$13,000</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Krieger Craftsmen, Inc.</b> Name _____	Case number (if known) _____
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3.39	<b>Nonpriority creditor's name and mailing address</b> <b>PCS Company</b> <b>34500 Doreka</b> <b>Fraser, MI 48026</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,748.52</b>
3.40	<b>Nonpriority creditor's name and mailing address</b> <b>Pioneer Construction</b> <b>550 Kirtland Street SW</b> <b>Grand Rapids, MI 49507</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Build-out</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$49,682.17</b>
3.41	<b>Nonpriority creditor's name and mailing address</b> <b>Positive Designs, LLC</b> <b>506 Arhana Crest Drive</b> <b>Middleville, MI 49333</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$13,755.00</b>
3.42	<b>Nonpriority creditor's name and mailing address</b> <b>Priority Health</b> <b>1231 E. Beltline NE</b> <b>Grand Rapids, MI 49525</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Health Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$11,531.44</b>
3.43	<b>Nonpriority creditor's name and mailing address</b> <b>Progressive Components</b> <b>235 Industrial Drive</b> <b>Wauconda, IL 60084</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,365.06</b>
3.44	<b>Nonpriority creditor's name and mailing address</b> <b>Protev International Inc.</b> <b>6090 Surety Drive, Suite 110-D</b> <b>El Paso, TX 79905</b> Date(s) debt was incurred <u>2019-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$144,549.28</b>
3.45	<b>Nonpriority creditor's name and mailing address</b> <b>PTSolutions</b> <b>PO Box 670587</b> <b>Detroit, MI 48267</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$151.56</b>

Debtor	<b>Krieger Craftsmen, Inc.</b> <small>Name</small>	Case number (if known) _____
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3.46	<b>Nonpriority creditor's name and mailing address</b> <b>RC Laser Weld LLC</b> <b>4036 Oakes Street SW</b> <b>Grandville, MI 49418</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$402.50</b>
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3.47	<b>Nonpriority creditor's name and mailing address</b> <b>Rowland Mold &amp; Machine</b> <b>9395 Henry Court</b> <b>Zeeland, MI 49464</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,600.00</b>
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3.48	<b>Nonpriority creditor's name and mailing address</b> <b>Star Crane &amp; Hoist</b> <b>11340- 54th Avenue</b> <b>Allendale, MI 49401</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,168.07</b>
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3.49	<b>Nonpriority creditor's name and mailing address</b> <b>Star Truck Rentals</b> <b>3940 Eastern Ave SE</b> <b>Grand Rapids, MI 49508</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$641.58</b>
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3.50	<b>Nonpriority creditor's name and mailing address</b> <b>Steel Craft Technologies</b> <b>8057 Graphic Industrial Drive</b> <b>Belmont, MI 49306</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,466.00</b>
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3.51	<b>Nonpriority creditor's name and mailing address</b> <b>T.A.A.G., Inc.</b> <b>7120 Division Ave S.</b> <b>Grand Rapids, MI 49548</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,286.71</b>
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3.52	<b>Nonpriority creditor's name and mailing address</b> <b>Tenibac-Standex</b> <b>35155 Automation Drive</b> <b>Clinton Township, MI 48035</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$34,550.00</b>
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Debtor	<b>Krieger Craftsmen, Inc.</b> Name _____	Case number (if known) _____
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3.53	<b>Nonpriority creditor's name and mailing address</b> <b>The Bolt Tin, LLC</b> <b>11331 3rd Avenue NW</b> <b>Grand Rapids, MI 49544</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$828.51</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.54	<b>Nonpriority creditor's name and mailing address</b> <b>Toledo Steel Supply, Inc.</b> <b>222 Lavoy Road</b> <b>Erie, MI 48133</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$11,385.07</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.55	<b>Nonpriority creditor's name and mailing address</b> <b>U.S. Small Business Admin</b> <b>2 North Street, Suite 320</b> <b>Birmingham, AL 35203</b> Date(s) debt was incurred <u>8/19/2020</u> Last 4 digits of account number <u>1462</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$149,900.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>UCC-1 Financing Statement filed. Treatment as unsecured.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.56	<b>Nonpriority creditor's name and mailing address</b> <b>U.S. Small Business Admin</b> <b>2 North Street, Suite 320</b> <b>Birmingham, AL 35203</b> Date(s) debt was incurred <u>8/19/2020</u> Last 4 digits of account number <u>1462</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$382,000.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>PPP Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.57	<b>Nonpriority creditor's name and mailing address</b> <b>Unisteel, LLC</b> <b>6155 Sims Drive</b> <b>Sterling Heights, MI 48313</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$52,500.37</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.58	<b>Nonpriority creditor's name and mailing address</b> <b>United Tool &amp; Mold, Inc.</b> <b>106 Financial Blvd</b> <b>Liberty, SC 29657</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$320,170.50</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.59	<b>Nonpriority creditor's name and mailing address</b> <b>Wyoming Chamber of Commerce</b> <b>4415 Byron Center Ave SW</b> <b>Wyoming, MI 49519</b> Date(s) debt was incurred <u>2020-</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$395.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

Debtor **Krieger Craftsmen, Inc.**  
Name

Case number (if known)

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>U.S. Small Business Admin Michigan District Office 477 Michigan Ave, Room 515 Detroit, MI 48226</b>	Line <b>3.56</b>	—
		<input type="checkbox"/> Not listed. Explain _____	

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <b>18,798.69</b>
5b. +	\$ <b>1,952,179.42</b>
5c.	\$ <b>1,970,978.11</b>



**Fill in this information to identify the case:**Debtor name **Krieger Craftsmen, Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

**Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.****1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1. State what the contract or lease is for and the nature of the debtor's interest **Acct# 02525-001L  
Opened 1/17/2017-  
Leased 3D Scanner  
Contract to be rejected**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Alico Equipment Finance Group  
W222N833 Cheaney Road  
Waukesha, WI 53186**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Acct# 11422  
Opened 6/10/2016-  
Potential Disguised  
Security Agreement-  
See Schedule D  
CNC Machine- (2)**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Corporate Funding, Inc.  
5136 Cascade Road SE  
Suite 1E  
Grand Rapids, MI 49546**

2.3. State what the contract or lease is for and the nature of the debtor's interest **Financial Advisors  
To be assumed**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Gantry Business Solutions  
200 Monroe Ave NW  
Suite 400  
Grand Rapids, MI 49503**

2.4. State what the contract or lease is for and the nature of the debtor's interest **Commercial Property  
Lease Agreement**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Jenta, LLC  
2758- 3 Mile Road NW  
Grand Rapids, MI 49534**

Debtor 1 **Krieger Craftsmen, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest

**Acct #110467  
Opened 10/17/2016  
Potential Disguised  
Security Agreement,  
See Schedule D  
Spotting Press**

State the term remaining

List the contract number of any government contract

**m2 Lease Funds, LLC  
175 N. Patrick Blvd, Suite 140  
Brookfield, WI 53045**

2.6. State what the contract or lease is for and the nature of the debtor's interest

**Accountants  
To be assumed**

State the term remaining

List the contract number of any government contract

**Nienhuis Financial Group  
3460 Wilson Ave SW  
Grandville, MI 49418**

**Fill in this information to identify the case:**Debtor name **Krieger Craftsmen, Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206H  
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:***2.1 J-Flex, LLC****2758- 3 Mile Road NW  
Grand Rapids, MI 49534****TCF National Bank**☒ D **2.5**  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_**2.2 Jenta, LLC****2758- 3 Mile Road NW  
Grand Rapids, MI 49534****TCF National Bank**☒ D **2.3**  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_**2.3 Jenta, LLC****2758- 3 Mile Road NW  
Grand Rapids, MI 49534****TCF National Bank**☒ D **2.4**  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_**2.4 Jenta, LLC****2758- 3 Mile Road NW  
Grand Rapids, MI 49534****TCF National Bank**☒ D **2.5**  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_**2.5 Jenta, LLC****2758- 3 Mile Road NW  
Grand Rapids, MI 49534****TCF National Bank**☒ D **2.6**  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

Debtor **Krieger Craftsmen, Inc.**

Case number (if known) \_\_\_\_\_

**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	<b>Timothy J. Krieger</b>	<b>1258 E. Two Pond Road Luther, MI 49656</b>	<b>TCF National Bank</b>	<input checked="" type="checkbox"/> D <u>2.3</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.7	<b>Timothy J. Krieger</b>	<b>1258 E. Two Pond Road Luther, MI 49656</b>	<b>TCF National Bank</b>	<input checked="" type="checkbox"/> D <u>2.4</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.8	<b>Timothy J. Krieger</b>	<b>1258 E. Two Pond Road Luther, MI 49656</b>	<b>TCF National Bank</b>	<input checked="" type="checkbox"/> D <u>2.5</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.9	<b>Timothy J. Krieger</b>	<b>1258 E. Two Pond Road Luther, MI 49656</b>	<b>TCF National Bank</b>	<input checked="" type="checkbox"/> D <u>2.6</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.10	<b>TK Krieger, LLC</b>	<b>2758- 3 Mile Road NW Grand Rapids, MI 49534</b>	<b>TCF National Bank</b>	<input checked="" type="checkbox"/> D <u>2.3</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.11	<b>TK Krieger, LLC</b>	<b>2758- 3 Mile Road NW Grand Rapids, MI 49534</b>	<b>TCF National Bank</b>	<input checked="" type="checkbox"/> D <u>2.4</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.12	<b>TK Krieger, LLC</b>	<b>2758- 3 Mile Road NW Grand Rapids, MI 49534</b>	<b>TCF National Bank</b>	<input checked="" type="checkbox"/> D <u>2.5</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.13	<b>TK Krieger, LLC</b>	<b>2758- 3 Mile Road NW Grand Rapids, MI 49534</b>	<b>TCF National Bank</b>	<input checked="" type="checkbox"/> D <u>2.6</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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